

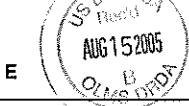
# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>6267</u>	2. Fiscal Year Covered From:  1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.  Name RODNEY L CAMERON  P.O. Box, Bldg., Room No., if any  Street 401 NEBRASKA STREET  City VALLEJO  State California ZIP Code + 4 94590	4. Name, file number, and address of labor organization.  Name PLUMBERS & STEAMFITTERS U.A. LOCAL NO. 343  Labor Organization File Number 048-580  P.O. Box, Building and Room Number, if any  Street 401 NEBRASKA STREET  City VALLEJO  State California ZIP Code + 4 94590
5. Position in labor organization. BUSINESS MANAGER	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any).  Name BENICIA PLUMBING  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 265 CHANNEL RD  City BENICIA  State California ZIP Code + 4 94510	7.a. Nature of Interest, Transaction, or Income.  ANNUAL CHRISTMAS DINNER  7.b. Amount.  \$100

### Signature

**15. Signature and verification.** The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed Rodney L. Cameron

On 08/01/2005  
Date

(707) 644-4071  
Telephone Number

# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only

E


READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <input type="text"/>	2. Fiscal Year Covered From: <input type="text"/> 1 / <input type="text"/> 1 / 2004 Through: <input type="text"/> 12 / <input type="text"/> 31 / 2004
3. Name and address of person filing. Name <input type="text"/> RODNEY <input type="text"/> L <input type="text"/> CAMERON P.O. Box, Bldg., Room No., if any <input type="text"/> Street <input type="text"/> 401 NEBRASKA STREET City <input type="text"/> VALLEJO State <input type="text"/> California ZIP Code + 4 <input type="text"/> 94590	4. Name, file number, and address of labor organization. Name <input type="text"/> PLUMBERS & STEAMFITTERS U.A. LOCAL NO. 343 Labor Organization File Number <input type="text"/> 048-580 P.O. Box, Building and Room Number, if any <input type="text"/> Street <input type="text"/> 401 NEBRASKA STREET City <input type="text"/> VALLEJO State <input type="text"/> California ZIP Code + 4 <input type="text"/> 94590
5. Position in labor organization. <input type="text"/> BUSINESS MANAGER	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <input type="text"/> NORTHERN CALIF, MECH. CONTRACTORS ASSOC Trade Name, if any: <input type="text"/> P.O. Box, Bldg., Room No., if any <input type="text"/> P.O. BOX 159 Street <input type="text"/> City <input type="text"/> BENICIA State <input type="text"/> California ZIP Code + 4 <input type="text"/> 94510	7.a. Nature of Interest, Transaction, or Income. <input type="text"/> INSTALLATION DINNER/ROOM/GOLF 7.b. Amount. <input type="text"/> \$1,000

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed 	On <input type="text"/> 08/01/2005 Date	<input type="text"/> (707) 644-4071 Telephone Number

# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

E

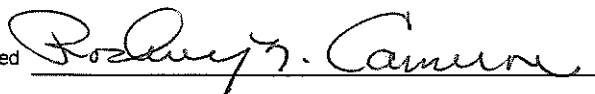
1. File Number U - <input type="text"/>	2. Fiscal Year Covered From: <input type="text"/> / <input type="text"/> / <input type="text"/> Through: <input type="text"/> / <input type="text"/> / <input type="text"/>
3. Name and address of person filing. Name <input type="text"/> RODNEY <input type="text"/> L <input type="text"/> CAMERON P.O. Box, Bldg., Room No., if any <input type="text"/> Street <input type="text"/> 401 NEBRASKA STREET City <input type="text"/> VALLEJO State <input type="text"/> California ZIP Code + 4 <input type="text"/> 94590	4. Name, file number, and address of labor organization. Name <input type="text"/> PLUMBERS & STEAMFITTERS U.A. LOCAL 343 Labor Organization File Number <input type="text"/> 048-580 P.O. Box, Building and Room Number, if any <input type="text"/> Street <input type="text"/> 401 NEBRASKA STREET City <input type="text"/> VALLEJO State <input type="text"/> California ZIP Code + 4 <input type="text"/> 94590
5. Position in labor organization. <input type="text"/>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <input type="text"/> SOUTHLAND INDUSTRIES Trade Name, if any: <input type="text"/> P.O. Box, Bldg., Room No., if any <input type="text"/> Street <input type="text"/> 775 COMMERCIAL STREET City <input type="text"/> SAN JOSE State <input type="text"/> California ZIP Code + 4 <input type="text"/> 95112	7.a. Nature of Interest, Transaction, or Income. <input type="text"/> GOLF - RANCHO SOLANO 7.b. Amount. <input type="text"/> \$65

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed 

On  08/01/2005

Date

707-644-4071

Telephone Number

Name of Person Filing <b>RODNEY CAMERON</b>	File Number <b>U-</b>
---	-----------------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>APPRENTICE TRAINING TRUST FUND LOCAL 343</b></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name <input type="text"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b> <input type="text"/></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>APPRENTICE TURN OUT DINNER/FLORIST - REIMBURSEMENT</b></p> <div style="border: 1px solid black; height: 100px; margin-top: 5px;"></div> <p><b>12.b. Amount.</b> <span style="float: right;"><b>\$13,928</b></span></p>

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name <input type="text"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>
<p><b>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</b></p>	<p><b>14.b. Amount of payment.</b> <input type="text"/></p>

Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<b>8. Name and address of Business (including trade name, if any).</b> Name <b>APPRENTICE TRAINING TRUST FUND LOCAL 343</b> Trade Name, if any: P.O. Box, Bldg., Room No., if any Street <b>401 NEBRASKA STREET</b> City <b>VALLEJO</b> State <b>California</b> ZIP Code + 4 <b>94590</b>	<b>9. Business deals with:</b> <input type="checkbox"/> a. Labor Organization <input checked="" type="checkbox"/> b. Trust <input type="checkbox"/> c. Employer
<b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b> Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	<b>11.a. Nature of such dealing.</b>  <b>11.b. Approximate dollar value of such dealing.</b> <b>12.a. Nature of interest held or income received.</b> <b>INSTRUCTOR TRAINING SEMINAR - ANN ARBOR MICHIGAN</b> <b>AIRE FARE, AIRPORT PARKING, HOTEL</b> <b>12.b. Amount.</b> <b>\$1,025</b>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b> Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	<b>14.a. Nature of payment.</b>  <b>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</b> <b>14.b. Amount of payment.</b>
---	--

Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>APPRENTICE TRAINING TRUST FUND LOCAL 343</b></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name <input type="text"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b> <input type="text"/></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>INSTRUCTOR TRAINING SEMINAR - GIFT CARDS FOR GRADUATES - DINNER FOR GRADUATES</b></p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p><b>12.b. Amount.</b> <input type="text" value="\$413"/></p>

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name <input type="text"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>
<p><b>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</b></p>	<p><b>14.b. Amount of payment.</b> <input type="text"/></p>

Name of Person Filing RODNEY CAMERON

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name APPRENTICE TRAINING TRUST FUND LOCAL 343

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 401 NEBRASKA STREET

City VALLEJO

State California ZIP Code + 4 94590

## 9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

## 11.a. Nature of such dealing.

## 11.b. Approximate dollar value of such dealing.

## 12.a. Nature of interest held or income received.

INSTRUCTOR/COMMITTEE CHRISTMAS DINNER

## 12.b. Amount.

\$1,343

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

## 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

## 14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

## 14.b. Amount of payment.

Name of Person Filing RODNEY CAMERON

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name LOCAL 343 JOINT LABOR MGMT COOPERATION

Trade Name, if any: COMMITTEE TRUST FUND

P.O. Box, Bldg., Room No., if any

Street 401 NEBRASKA STREET

City VALLEJO

State California ZIP Code + 4 94590

## 9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

## 11.a. Nature of such dealing.

## 11.b. Approximate dollar value of such dealing.

## 12.a. Nature of interest held or income received.

WESTERN STATE PIPE TRADES CONFERENCE

## 12.b. Amount.

\$210

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

## 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

## 14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

## 14.b. Amount of payment.



Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b> <span style="border: 1px solid black; padding: 0 20px;"></span></p> <p><b>12.a. Nature of interest held or income received.</b></p> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p><b>WESTERN STATE PIPE TRADES CONFERENCE - GOLF REGISTRATION</b></p> </div> <p><b>12.b. Amount.</b> <span style="border: 1px solid black; padding: 0 20px; float: right;"><b>\$120</b></span></p>

**C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.**

<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>
<p><b>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</b></p>	<p><b>14.b. Amount of payment.</b> <span style="border: 1px solid black; padding: 0 20px; float: right;"></span></p>

Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>AIRFARE TO MCA CONFERENCE IN ORLANDO</b></p> <div style="border: 1px solid black; height: 100px; margin-top: 5px;"></div> <p><b>12.b. Amount.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; text-align: right;"><b>\$318</b></span></p>

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 100px; margin-top: 5px;"></div>
<p><b>13.b. Is the Business an Employer</b> <input type="checkbox"/> <b>or Consultant</b> <input type="checkbox"/> <b>?</b></p>	<p><b>14.b. Amount of payment.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span></p>

Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b></p> <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>LOCAL 393 100 YEAR ANNIVERSARY - TRANSPORTATION</b></p> <div style="border: 1px solid black; height: 100px; margin-top: 5px;"></div> <p><b>12.b. Amount.</b></p> <div style="border: 1px solid black; float: right; padding: 2px 10px;"><b>\$140</b></div>

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>
<p><b>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</b></p>	<p><b>14.b. Amount of payment.</b></p> <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>







Name of Person Filing <b>RODNEY CAMERON</b>	File Number <b>U-</b>
---	-----------------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>						
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span></p> <p><b>12.a. Nature of interest held or income received.</b></p> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>MCA CONVENTION MONTERAY-</p> <table style="width: 100%;"> <tr> <td>MISC MEALS &amp; DRINKS</td> <td style="text-align: right;">\$350.00</td> </tr> <tr> <td>HOTEL</td> <td style="text-align: right;">\$933.97</td> </tr> <tr> <td>DINNER</td> <td style="text-align: right;">\$175.00</td> </tr> </table> </div> <p><b>12.b. Amount.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; text-align: right; vertical-align: bottom;">\$1,459</span></p>	MISC MEALS & DRINKS	\$350.00	HOTEL	\$933.97	DINNER	\$175.00
MISC MEALS & DRINKS	\$350.00						
HOTEL	\$933.97						
DINNER	\$175.00						

**C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.**

<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 100px; margin-top: 5px;"></div>
<p><b>13.b. Is the Business an Employer</b> <input type="checkbox"/> <b>or Consultant</b> <input type="checkbox"/> <b>?</b></p>	<p><b>14.b. Amount of payment.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span></p>





Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. Is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <p><b>WESTERN MECHANICAL CONFERENCE - 4 DAY PER DIEM @ \$100.00 PER DAY</b></p> <p><b>11.b. Approximate dollar value of such dealing.</b> <b>\$400</b></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>12.b. Amount.</b></p>

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p>
<p><b>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</b></p>	<p><b>14.b. Amount of payment.</b></p>

Name of Person Filing <b>RODNEY CAMERON</b>	File Number <b>U-</b>
---	-----------------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>BOY SCOUTS PATRON DINNER</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>12.b. Amount.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle; text-align: center;"><b>\$50</b></span></p>

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 100px; margin-top: 5px;"></div>
<p><b>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</b></p>	<p><b>14.b. Amount of payment.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span></p>

Name of Person Filing <b>RODNEY CAMERON</b>	File Number <b>U-</b>
---	-----------------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b></p> <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>SACRAMENTO COUNTY AIRPORT PARKING - WESTERN STATES PIPE TRADES</b></p>
	<p><b>12.b. Amount.</b></p> <div style="border: 1px solid black; padding: 2px; float: right;">\$56</div>

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>
<p><b>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</b></p>	<p><b>14.b. Amount of payment.</b></p> <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>

Name of Person Filing <b>RODNEY CAMERON</b>	File Number <b>U-</b>
---	-----------------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<b>8. Name and address of Business (including trade name, if any).</b> Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b> Trade Name, if any: <b>COMMITTEE TRUST FUND</b> P.O. Box, Bldg., Room No., if any Street <b>401 NEBRASKA STREET</b> City <b>VALLEJO</b> State <b>California</b> ZIP Code + 4 <b>94590</b>	<b>9. Business deals with:</b> <input type="checkbox"/> a. Labor Organization <input checked="" type="checkbox"/> b. Trust <input type="checkbox"/> c. Employer
<b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b> Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	<b>11.a. Nature of such dealing.</b>  <b>11.b. Approximate dollar value of such dealing.</b>  <b>12.a. Nature of interest held or income received.</b> <b>WESTERN MECH LABOR CONFERENCE - HOTEL</b>  <b>12.b. Amount.</b> <b>\$684</b>

**C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.**

<b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b> Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	<b>14.a. Nature of payment.</b>  <b>14.b. Amount of payment.</b>
<b>13.b. Is the Business an Employer</b> <input type="checkbox"/> <b>or Consultant</b> <input type="checkbox"/> <b>?</b>	

Name of Person Filing <b>RODNEY CAMERON</b>	File Number <b>U-</b>
---	-----------------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>OAKLAND A'S BASEBALL GAME - VALERO</b></p> <div style="border: 1px solid black; height: 100px; margin-top: 5px;"></div> <p><b>12.b. Amount.</b> <span style="float: right;"><b>\$34</b></span></p>

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>
<p><b>13.b. Is the Business an Employer</b> <input type="checkbox"/> <b>or Consultant</b> <input type="checkbox"/> <b>?</b></p>	<p><b>14.b. Amount of payment.</b></p> <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>



Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <p>    </p> <p><b>11.b. Approximate dollar value of such dealing.</b></p> <p> </p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>CONTRA COSTA COLLEGE FOUNDATION GOLF TOURNAMENT - DINNER &amp; GOLF</b></p> <p>   </p> <p><b>12.b. Amount.</b></p> <p style="text-align: right;"><b>\$300</b></p>

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p> <p>          </p>
<p><b>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</b></p>	<p><b>14.b. Amount of payment.</b></p> <p> </p>

Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <p><b>11.b. Approximate dollar value of such dealing.</b></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>AIRPORT PARKING - WESTERN MECH. CONF.</b></p> <p><b>12.b. Amount.</b> <span style="float: right;"><b>\$24</b></span></p>

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p>
<p><b>13.b. Is the Business an Employer</b> <input type="checkbox"/> <b>or Consultant</b> <input type="checkbox"/> <b>?</b></p>	<p><b>14.b. Amount of payment.</b></p>



Name of Person Filing <b>RODNEY CAMERON</b>	File Number <b>U-</b>
---	-----------------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>VALERO - TEXAS - CHILDRENS BENEFIT - GOLF TOURNAMNET AIRFARE</b></p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p><b>12.b. Amount.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span> <b>\$503</b></p>

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>
<p><b>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</b></p>	<p><b>14.b. Amount of payment.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span></p>

Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b> <span style="border: 1px solid black; padding: 2px 20px;"></span></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>OMEGA BOYS &amp; GIRLS BENEFIT GOLF TOURNAMENT-REGISTRATION &amp; DINNER</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>12.b. Amount.</b> <span style="border: 1px solid black; padding: 2px 20px; float: right;"><b>\$110</b></span></p>

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>
<p><b>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</b></p>	<p><b>14.b. Amount of payment.</b> <span style="border: 1px solid black; padding: 2px 20px; float: right;"></span></p>

Name of Person Filing <b>RODNEY CAMERON</b>	File Number <b>U-</b>
---	-----------------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <p><b>11.b. Approximate dollar value of such dealing.</b></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>CALIFORNIA STATE PIPE TRADES SCHOLARSHIP GOLF TOURNAMENT - REGISTRATION &amp; DINNER</b></p> <p><b>12.b. Amount.</b> <b>\$100</b></p>

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p>
<p><b>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</b></p>	<p><b>14.b. Amount of payment.</b></p>

Name of Person Filing <b>RODNEY CAMERON</b>		File Number <b>U-</b>
<b>B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.</b>		
<b>8. Name and address of Business (including trade name, if any).</b> Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b> Trade Name, if any: <b>COMMITTEE TRUST FUND</b> P.O. Box, Bldg., Room No., if any Street <b>401 NEBRASKA STREET</b> City <b>VALLEJO</b> State <b>California</b> ZIP Code + 4 <b>94590</b>		<b>9. Business deals with:</b> <input type="checkbox"/> a. Labor Organization <input checked="" type="checkbox"/> b. Trust <input type="checkbox"/> c. Employer
<b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b> Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4		<b>11.a. Nature of such dealing.</b>  <b>11.b. Approximate dollar value of such dealing.</b>  <b>12.a. Nature of interest held or income received.</b> <b>VALERO - TEXAS - CHILDRENS BENEFIT - GOLF TOURNAMNET &amp; DINNER</b>  <b>12.b. Amount.</b> <b>\$400</b>
<b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b>		
<b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b> Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4		<b>14.a. Nature of payment.</b>  <b>14.b. Amount of payment.</b>
<b>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</b>		

Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>SEDCORP GOLF</b></p> <div style="border: 1px solid black; height: 100px; margin-top: 5px;"></div> <p><b>12.b. Amount.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span> <b>\$175</b></p>

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>
<p><b>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</b></p>	<p><b>14.b. Amount of payment.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span></p>



Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <p><b>VALLERO CHILDREN BENEFIT GOLF TOURNAMENT - 6 DAYS PER DIEM @ \$100.00 PER DAY</b></p> <p><b>11.b. Approximate dollar value of such dealing.</b> <b>\$600</b></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>12.b. Amount.</b></p>

**C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.**

<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p>
<p><b>13.b. Is the Business an Employer</b> <input type="checkbox"/> <b>or Consultant</b> <input type="checkbox"/> <b>?</b></p>	<p><b>14.b. Amount of payment.</b></p>

Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>MCA REGISTRATION &amp; GOLF</b></p> <div style="border: 1px solid black; height: 100px; margin-top: 5px;"></div> <p><b>12.b. Amount.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span> <b>\$2,025</b></p>

**C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.**

<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>
<p><b>13.b. Is the Business an Employer</b> <input type="checkbox"/> <b>or Consultant</b> <input type="checkbox"/> <b>?</b></p>	<p><b>14.b. Amount of payment.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span></p>



Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<b>8. Name and address of Business (including trade name, if any).</b>  Name <input style="width: 90%;" type="text" value="LOCAL 343 JOINT LABOR MGMT COOPERATION"/>  Trade Name, if any: <input style="width: 90%;" type="text" value="COMMITTEE TRUST FUND"/>  P.O. Box, Bldg., Room No., if any <input style="width: 80%;" type="text"/>  Street <input style="width: 90%;" type="text" value="401 NEBRASKA STREET"/>  City <input style="width: 90%;" type="text" value="VALLEJO"/>  State <input style="width: 20%;" type="text" value="California"/> ZIP Code + 4 <input style="width: 20%;" type="text" value="94590"/>	<b>9. Business deals with:</b>  <input type="checkbox"/> a. Labor Organization <input checked="" type="checkbox"/> b. Trust <input type="checkbox"/> c. Employer
<b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b>  Name <input style="width: 90%;" type="text"/>  Trade Name, if any: <input style="width: 90%;" type="text"/>  P.O. Box, Bldg., Room No., if any <input style="width: 80%;" type="text"/>  Street <input style="width: 90%;" type="text"/>  City <input style="width: 90%;" type="text"/>  State <input style="width: 20%;" type="text"/> ZIP Code + 4 <input style="width: 20%;" type="text"/>	<b>11.a. Nature of such dealing.</b> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>
	<b>11.b. Approximate dollar value of such dealing.</b> <input style="width: 150px;" type="text"/>
	<b>12.a. Nature of interest held or income received.</b> <div style="border: 1px solid black; padding: 5px;">         VALERO - TEXAS - CHILDRENS BENEFIT - GOLF TOURNAMNET          - HOTEL       </div>
	<b>12.b. Amount.</b> <input style="width: 150px;" type="text" value="\$917"/>

**C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.**

<b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b>  Name <input style="width: 90%;" type="text"/>  Trade Name, if any: <input style="width: 90%;" type="text"/>  P.O. Box, Bldg., Room No., if any <input style="width: 80%;" type="text"/>  Street <input style="width: 90%;" type="text"/>  City <input style="width: 90%;" type="text"/>  State <input style="width: 20%;" type="text"/> ZIP Code + 4 <input style="width: 20%;" type="text"/>	<b>14.a. Nature of payment.</b> <div style="border: 1px solid black; height: 150px; width: 100%;"></div>
<b>13.b. Is the Business an Employer</b> <input type="checkbox"/> <b>or Consultant</b> <input type="checkbox"/> <b>?</b>	<b>14.b. Amount of payment.</b> <input style="width: 150px;" type="text"/>



Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>SOLANO-YOLO COUNTY VETERAN GOLF TOURNAMENT</b></p> <div style="border: 1px solid black; height: 100px; margin-top: 5px;"></div> <p><b>12.b. Amount.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span> <b>\$75</b></p>

**C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.**

<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>
<p><b>13.b. Is the Business an Employer</b> <input type="checkbox"/> <b>or Consultant</b> <input type="checkbox"/> <b>?</b></p>	<p><b>14.b. Amount of payment.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span></p>

Name of Person Filing <b>RODNEY CAMERON</b>	File Number <b>U-</b>
---	-----------------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>VALERO - TEXAS GOLF TOURNAMNET AIRPORT PARKING</b></p> <div style="border: 1px solid black; height: 100px; margin-top: 5px;"></div> <p><b>12.b. Amount.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span> <b>\$42</b></p>

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>
<p><b>13.b. Is the Business an Employer</b> <input type="checkbox"/> <b>or Consultant</b> <input type="checkbox"/> <b>?</b></p>	<p><b>14.b. Amount of payment.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span></p>

Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>LODGING - MCA CONVENTION - ARIZONA</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>12.b. Amount.</b> <span style="float: right;"><b>\$1,177</b></span></p>

**C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.**

<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>
<p><b>13.b. Is the Business an Employer</b> <input type="checkbox"/> <b>or Consultant</b> <input type="checkbox"/> <b>?</b></p>	<p><b>14.b. Amount of payment.</b></p> <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>

Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>LOCAL 343 JOINT LABOR MGMT COOPERATION</b></p> <p>Trade Name, if any: <b>COMMITTEE TRUST FUND</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>401 NEBRASKA STREET</b></p> <p>City <b>VALLEJO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94590</b></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>SOLANO COUNTY GOV. CENTER GALA GRAND OPENING DINNER</b></p> <div style="border: 1px solid black; height: 100px; margin-top: 5px;"></div> <p><b>12.b. Amount.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span> <b>\$100</b></p>

**C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.**

<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>
<p><b>13.b. Is the Business an Employer</b> <input type="checkbox"/> <b>or Consultant</b> <input type="checkbox"/> <b>?</b></p>	<p><b>14.b. Amount of payment.</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span></p>

Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <b>LOCAL 342 JATC</b></p> <p>Trade Name, if any: </p> <p>P.O. Box, Bldg., Room No., if any: </p> <p>Street <b>935 DETROIT AVE</b></p> <p>City <b>CONCORD</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94518</b></p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name: </p> <p>Trade Name, if any: </p> <p>P.O. Box, Bldg., Room No., if any: </p> <p>Street: </p> <p>City: </p> <p>State: ZIP Code + 4: </p>	<p>11.a. Nature of such dealing.</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div> <p>11.b. Approximate dollar value of such dealing. </p> <p>12.a. Nature of interest held or income received.</p> <p><b>LOCAL 342 APPRENTICE TURN OUT DINNER</b></p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p>12.b. Amount. <span style="float: right;"><b>\$75</b></span></p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name: </p> <p>Trade Name, if any: </p> <p>P.O. Box, Bldg., Room No., if any: </p> <p>Street: </p> <p>City: </p> <p>State: ZIP Code + 4: </p>	<p>14.a. Nature of payment.</p> <div style="border: 1px solid black; height: 150px; width: 100%;"></div>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment.</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Name of Person Filing <b>RODNEY CAMERON</b>	File Number U-
---	----------------

**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <input type="text"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name <input type="text"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p>	<p><b>11.a. Nature of such dealing.</b></p> <p><input type="text"/></p> <p><b>11.b. Approximate dollar value of such dealing.</b> <input type="text"/></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><input type="text"/></p> <p><b>12.b. Amount.</b> <input type="text"/></p>

**C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.**

<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name <b>ADAMS AND BROADWELL</b></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <b>601 GATEWAY BLVD., SUITE 1000</b></p> <p>City <b>SAN FRANCISCO</b></p> <p>State <b>California</b> ZIP Code + 4 <b>94080-7059</b></p>	<p><b>14.a. Nature of payment.</b></p> <p><b>SALMON</b></p>
<p><b>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</b></p>	<p><b>14.b. Amount of payment.</b> <input type="text"/> <b>\$54</b></p>